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PATENTS

CERTIFICATION MAILING

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Agata Glinska 12 November 2003
Agata Glinska Date

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Attorney's Docket No.: Beiersdorf 637 (100718-197)

Applicant(s) : Heinrich Gers-Barlag et al.
Serial No. : 09/640,822
Filed : August 17, 2000
For : Hydrous Cosmetic or Pharmaceutical Sticks
Group Art Unit : 1615
Examiner : Lauren Q. Wells

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

SUPPLEMENTAL INFORMATION DISCLOSURE STATEMENT

Sir:

Transmitted herewith is a Supplemental Information Disclosure Statement in the above-identified application. This Statement is submitted:

- within three months of the application filing date;
- more than three months from the application filing date but before the mailing date of the first Office Action on the merits.

Pursuant to 37 C.F.R. §§ 1.56 and 1.97, applicant(s) hereby make the following references of record in the above-identified patent application:

11/20/2003 HGEBREM1 00000026 141263 09640822

01 FC:1806 180.00 DA

US PATENT DOCUMENTS

4,446,051

BERTHOD

05/01/1984

FOREIGN PUBLICATIONS

JP 8217619

JAPAN

08/27/1996

Copies of the aforementioned references, which are listed on the accompanying Form PTO-1449 (submitted in duplicate), are enclosed herewith.

It is respectfully requested that these references be (1) fully considered by the Patent and Trademark Office during the examination of this application; and (2) printed on any patent which may issue on this application. Applicants request that a copy of Form PTO-1449, as considered and initialed by the Examiner, be returned with the next communication.

The applicants also wish to bring to the attention of the examiner of application SN: 10/031,554 filed on 16 September 2002. First named inventor Heinrich Gers-Barlag.

An early and favorable action is respectfully submitted.

Respectfully Submitted,

Howard C. Lee

Howard C. Lee

Reg. No. 48,104

Norris, McLaughlin & Marcus P.A.

220 East 42nd Street - 30th Floor

New York, N.Y. 10017

Telephone: (212)808-0700



LIST OF PATENTS AND PUBLICATIONS APPLICANT'S INFORMATION DISCLOSURE STATEMENT (Form PTO-1449)	Attorney Docket: Beiersdorf 637/100718-197	Serial No. 09/640,822
	Applicant: Gers-Barlaget al.	
	Filing Date: August 17, 2000	Group: 1615

U.S. PATENT DOCUMENTS

Examiner's Initial	Document Number	Date	Name	Class	Sub Class	Filing Date if appropriate
AA	4,446,051	05/1/1984	BERTHOD			9/2/1981

FOREIGN PATENT DOCUMENTS

Examiner's Initial	Document Number	Date	Country	Class	Sub Class	Translation	
						Yes	No
AB	JP 8217619	8/27/1996	JAPAN			xAbstract Only	

OTHER PRIOR ART (Including Author, Title, Date, Pertinent Pages, Etc.)

EXAMINER:	DATE CONSIDERED:
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- **EXAMINER:** Initial if Reference considered, whether or not citation is in conformance with MPEP 609; Draw line through citation if not in conformation and not considered, include copy of this form with next communication to applicant.
-



Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

<h1 style="margin: 0;">FEE TRANSMITTAL</h1> <h2 style="margin: 0;">for FY 2004</h2> <p style="font-size: small; margin: 5px 0;">Effective 10/01/2003. Patent fees are subject to annual revision.</p>		Complete if Known	
		Application Number	09/640,822
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Filing Date	August 17, 2000
		First Named Inventor	Gers-Barlag
TOTAL AMOUNT OF PAYMENT (\$) \$180.00		Examiner Name	Lauren Q. Wells
		Art Unit	1615
		Attorney Docket No.	Beiersdorf 637/ 100718-197

<p>METHOD OF PAYMENT (check all that apply)</p> <p> <input type="checkbox"/> Check <input type="checkbox"/> Credit card <input type="checkbox"/> Money Order <input type="checkbox"/> Other <input type="checkbox"/> None </p> <p> <input checked="" type="checkbox"/> Deposit Account: Deposit Account Number: Norris, McLaughlin & Marcus Deposit Account Name: 14-1263 </p> <p>The Director is authorized to: (check all that apply)</p> <p> <input checked="" type="checkbox"/> Charge fee(s) indicated below <input checked="" type="checkbox"/> Credit any overpayments <input checked="" type="checkbox"/> Charge any additional fee(s) or any underpayment of fee(s) <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account. </p> <p style="text-align: center; font-weight: bold;">FEE CALCULATION</p> <p>1. BASIC FILING FEE</p> <table border="1" style="width:100%; border-collapse: collapse; font-size: x-small;"> <thead> <tr> <th colspan="2">Large Entity</th> <th colspan="2">Small Entity</th> <th rowspan="2">Fee Description</th> <th rowspan="2">Fee Paid</th> </tr> <tr> <th>Fee Code</th> <th>Fee (\$)</th> <th>Fee Code</th> <th>Fee (\$)</th> </tr> </thead> <tbody> <tr><td>1001</td><td>770</td><td>2001</td><td>385</td><td>Utility filing fee</td><td></td></tr> <tr><td>1002</td><td>340</td><td>2002</td><td>170</td><td>Design filing fee</td><td></td></tr> <tr><td>1003</td><td>530</td><td>2003</td><td>265</td><td>Plant filing fee</td><td></td></tr> <tr><td>1004</td><td>770</td><td>2004</td><td>385</td><td>Reissue filing fee</td><td></td></tr> <tr><td>1005</td><td>160</td><td>2005</td><td>80</td><td>Provisional filing fee</td><td></td></tr> <tr> <td colspan="4" style="text-align: right;">SUBTOTAL (1)</td> <td>(\$)</td> <td></td> </tr> </tbody> </table> <p>2. EXTRA CLAIM FEES FOR UTILITY AND</p> <table border="1" style="width:100%; border-collapse: collapse; font-size: x-small;"> <thead> <tr> <th colspan="2">Extra Claims</th> <th colspan="2">Fee from below</th> <th rowspan="2">Fee Paid</th> </tr> <tr> <th>Total Claims</th> <th>-20** =</th> <th>0</th> <th>X</th> </tr> </thead> <tbody> <tr> <td>Independent Claims</td> <td>-3** =</td> <td>0</td> <td>X</td> <td>0.00</td> </tr> <tr> <td>Multiple Dependent</td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table> <table border="1" style="width:100%; border-collapse: collapse; font-size: x-small;"> <thead> <tr> <th colspan="2">Large Entity</th> <th colspan="2">Small Entity</th> <th rowspan="2">Fee Description</th> <th rowspan="2">Fee Paid</th> </tr> <tr> <th>Fee Code</th> <th>Fee (\$)</th> <th>Fee Code</th> <th>Fee (\$)</th> </tr> </thead> <tbody> <tr><td>1202</td><td>18</td><td>2202</td><td>9</td><td>Claims in excess of 20</td><td></td></tr> <tr><td>1201</td><td>86</td><td>2201</td><td>43</td><td>Independent claims in excess of 3</td><td></td></tr> <tr><td>1203</td><td>290</td><td>2203</td><td>145</td><td>Multiple dependent claim, if not paid</td><td></td></tr> <tr><td>1204</td><td>86</td><td>2204</td><td>43</td><td>** Reissue independent claims over original patent</td><td></td></tr> <tr><td>1205</td><td>18</td><td>2205</td><td>9</td><td>** Reissue claims in excess of 20 and over original patent</td><td></td></tr> <tr> <td colspan="4" style="text-align: right;">SUBTOTAL (2)</td> <td>(\$)</td> <td>0.00</td> </tr> </tbody> </table> <p><small>**or number previously paid, if greater; For Reissues, see above</small></p>	Large Entity		Small Entity		Fee Description	Fee Paid	Fee Code	Fee (\$)	Fee Code	Fee (\$)	1001	770	2001	385	Utility filing fee		1002	340	2002	170	Design filing fee		1003	530	2003	265	Plant filing fee		1004	770	2004	385	Reissue filing fee		1005	160	2005	80	Provisional filing fee		SUBTOTAL (1)				(\$)		Extra Claims		Fee from below		Fee Paid	Total Claims	-20** =	0	X	Independent Claims	-3** =	0	X	0.00	Multiple Dependent					Large Entity		Small Entity		Fee Description	Fee Paid	Fee Code	Fee (\$)	Fee Code	Fee (\$)	1202	18	2202	9	Claims in excess of 20		1201	86	2201	43	Independent claims in excess of 3		1203	290	2203	145	Multiple dependent claim, if not paid		1204	86	2204	43	** Reissue independent claims over original patent		1205	18	2205	9	** Reissue claims in excess of 20 and over original patent		SUBTOTAL (2)				(\$)	0.00	<p>3. 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SUBMITTED BY		Complete (if applicable)			
Name (Print/Type)	Howard C. Lee	Registration No. (Attorney/Agent)	48,104	Telephone	212-808-0700
Signature	<i>Howard C. Lee</i>	Date	12 November 2003		

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